PART B - FEE(S) TRANSMITTAL

implete and send this form, together with applicable fee(s), to: Mail

AU6 0 3 2004

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: The for appropriate. All further cor indicated in the school rected to maintenance fee notification	m should be used for trans respondence including the libelow or directed otherwise is.	smitting the ISSUI Patent, advance ordin Block 1, by (a)	lers and noti	fication of maintenance in new correspondence ad	fees will be mailed to the curren dress; and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  7590 06/02/2004				Note: A certification Fee(s) Transmitt papers. Each add	Note: A certificate of mailing can only be used for domestic mailings' of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
MURAMATSU & ASSOCIATES Suite 225 7700 Irvine Center Drive Irvine, CA 92618				I hereby certify States Postal Ser	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
, HVIIIC, CA 72010						(Depositor's name)	
•						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED IN		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/623,837	07/19/2003	Egidio Marc		arcantoni	ANWAL.053AUS	6512	
FITLE OF INVENTION: M	ASSAGE DEVICE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$665		\$300	\$965	09/02/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
THANH, QUANG D		3764 601-099000					
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single				
Address form PTO/SB/12  7 "Fee Address" indicati PTO/SB/47; Rev 03-02 of Number is required.	ion form	firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)		-11	
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN	d to the USPTO or is being s	submitted under sep	arate cover.	er on the patent. Inclusion Completion of this form i EE: (CITY and STATE O	n of assignee data is only appropr s NOT a substitute for filing an as R COUNTRY)	iate when an assignment has signment.	
CIAR S.P.A. Pesaro, Italy							
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the p	atent); 🔲 individual	Corporation or other private a	group entity    government	
a. The following fee(s) are	enclosed:		Payment of	• •			
Issue Fee			A check is	the amount of the fee(s)	is enclosed.		
Publication Fee	Coning 5		•	y credit card. Form PTO			
Advance Order - # of	Copies		Deposit Acc	ount Number	·	copy of this form).	
Director for Patents is reques	sted to apply the Issue Fee ar	nd Publication Fee	(if any) or to	re-apply any previously	paid issue fee to the application id	entified above.	
Authorized Signature)	Mwarata	(Date)	/21/0	<i>F</i>	ODA SSANDARI 00000005 1066	23837	

other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

01 FC:2501 02 FC:1504 03 FC:8001

665.00 OP 300.00 OP 15.00 OP



## **PATENT**

Case Docket No. ANWAL.053AUS

Date: July 22, 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

: Egidio Marcantoni

Appl. No.

: 10/623,837

Filed

: July 19, 2003

For

: MASSAGE DEVICE

Group Art Unit

: 3764

Batch No.

Examiner

: Thanh, Quang D.

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on

July 22, 2004

## TRANSMITTAL LETTER

## **COMMISSIONER FOR PATENTS** P. O. BOX 1450, ALEXANDRIA, VA 22313-1450

ATTENTION: OFFICE OF PATENT PUBLICATIONS

Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- Form PTOL-85b.
- A check in the amount of \$980.00 to cover the issue fee is enclosed.
- Return prepaid postcard. (X)

suo Muramatsu Registration No. 38,684 Attorney of Record

TRS-ANWAL53-ISS 072204